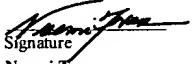


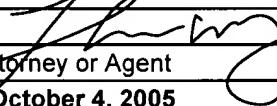


1FV 2182

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/758,831
		Filing Date	January 11, 2001
		First Named Inventor	Yue Chen
		Group Art Unit	2182
		Examiner Name	Joshua D. Schneider
<input type="checkbox"/> Sent via Express Mail Label No.: _____		Attorney Docket Number	150562.01

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate; \$370.00 total fee) <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Drawing(s) ( sheets)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Declaration <input type="checkbox"/> Newly Executed ( pages) <input type="checkbox"/> A copy from a prior application (37 CFR 1.63(d)) ( pages)	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Information Disclosure Statement with Form PTO/SB/08A ( pages)	<input type="checkbox"/> Petition	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> A copy of the Notice to File Missing Parts Under 37 CFR 1.52 or 1.5	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Application Data Sheet
<b>CERTIFICATE OF MAILING OR TRANSMISSION</b> <small>(Under 37 CFR § 1.8(a))</small> I hereby certify that this correspondence is being:		<input type="checkbox"/> Request for Corrected Filing Receipt
<input checked="" type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450; or  <input type="checkbox"/> transmitted by facsimile on the date shown below to the USPTO at (571) _____.		<input checked="" type="checkbox"/> Return Receipt Postcard
<u>October 4, 2005</u> Date		<input type="checkbox"/> Other Enclosure(s) (please identify below): <input checked="" type="checkbox"/> Copy of this transmittal form. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
 Signature <b>Noemi Tovar</b> Printed Name		Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required, or credit any overpayments, to Deposit Account No. 50-0463 for the above identified patent application.

#### SIGNATURE OF ATTORNEY OR AGENT

Signature		Reg. No.	48,577
Name of Attorney or Agent	Thomas Wong		
Date	October 4, 2005	Tel.	(425) 707-3591
Assignee Name:	MICROSOFT CORPORATION ONE MICROSOFT WAY REDMOND, WA 98052		
Customer Number:	22971		



Effective on 12/08/04

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 370.00)

<i>Complete if Known</i>	
Application Number	09/758,831
Filing Date	January 11, 2001
First Named Inventor	Yue Chen
Examiner Name	Joshua D. Schneider
Art Unit	2182
Attorney Docket No.	150562.01
Express Mail Label No.	

**METHOD OF PAYMENT** (check all that apply)

Check    Credit Card    Money Order    None    Other (please identify): \_\_\_\_\_

Deposit Account   Deposit Account Number: **50-0463**   Deposit Account Name: **MICROSOFT CORPORATION**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- |                                                                                                                        |                                                                                   |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Charge fee(s) indicated below                                                      | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION**
**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	0

**2. EXCESS CLAIM FEES**
Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent      50      25  
 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent      200      100  
 Multiple dependent claims      360      180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
31	- 30 or HP = 1	x 50	= 50
HP = highest number of total claims paid for, if greater than 20			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
5	- 4 or HP = 1	x 200	= 200
HP = highest number of independent claims paid for, if greater than 3			

<u>Multiple Dependent Claims</u>	
<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
0	0

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
-100 = 0	/ 50 = 0	(round up to a whole) number x 250	= 0	0

**4. OTHER FEE(S)**

Non-English Specification,    \$130 fee (no small entity discount)      0

Other: Extension of Time Request      120

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) <b>48,577</b>	Telephone <b>(425) 707-3591</b>
Name (Print/Type)	<b>Thomas Wong</b>		Date <b>October 4, 2005</b>